



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Stephane Lubiarz et al. § Group Art Unit: 2644
Serial No.: 09/806,756 §
Filed: May 3, 2001 § Examiner:
For: METHOD AND DEVICE FOR § Atty. Dkt. No.: MATR-0018-US
DETECTING VOICE ACTIVITY §

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REQUEST FOR CORRECTED OFFICIAL FILING RECEIPT

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Dear Sir:

Enclosed is a copy of the Official Filing Receipt marked in red to show a correction that is needed. The correction is as follows:

Please correct the last name of the second named inventor to --HINARD--.

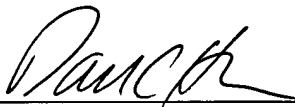
Issuance of a corrected Official Filing Receipt is respectfully requested.

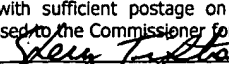
☒ This Request for Corrected Official Filing Receipt is being filed to correct a Patent Office error. No fee is required.

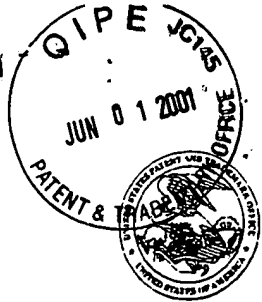
☐ The \$25.00 fee required under 37 C.F.R. § 1.19(h) to correct an Official Filing Receipt due to applicant error: ☐ is enclosed; ☐ is authorized to be charged to Deposit Account No. 20-1504 and this paper is submitted in duplicate.

Respectfully submitted,

Date: 5-30-01


Dan C. Hu, Registration No. 40,025
TROP, PRUNER & HU, P.C.
8554 Katy Freeway, Suite 100
Houston, TX 77024
(713) 468-8880
(713) 468-8883 FAX

Date of Deposit: May 30, 2001
I hereby certify under 37 CFR 1.8(a) that this correspondence is being deposited with the United States Postal Service as **first class mail** with sufficient postage on the date indicated above and is addressed to the Commissioner for Patents, Washington DC 20231.

Sherry Tipton



UNITED STATES PATENT AND TRADEMARK OFFICE

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APPLICATION NUMBER	FILING DATE	GRP ART UNIT	FIL FEE REC'D	ATTY. DOCKET NO.	DRAWINGS	TOT CLAIMS	IND CLAIMS
09/806,756	05/03/2001	2644	1278	MATR-0018-US	5	13	2

CONFIRMATION NO. 4915

FILING RECEIPT



OC000000006082243

Dan C Hu
Trop Pruner & Hu
Suite 100
8554 Katy Freeway
Houston, TX 77024

Date Mailed: 05/16/2001

Receipt is acknowledged of this nonprovisional Patent Application. It will be considered in its order and you will be notified as to the results of the examination. Be sure to provide the U.S. APPLICATION NUMBER, FILING DATE, NAME OF APPLICANT, and TITLE OF INVENTION when inquiring about this application. Fees transmitted by check or draft are subject to collection. Please verify the accuracy of the data presented on this receipt. If an error is noted on this Filing Receipt, please write to the Office of Initial Patent Examination's Customer Service Center. Please provide a copy of this Filing Receipt with the changes noted thereon. If you received a "Notice to File Missing Parts" for this application, please submit any corrections to this Filing Receipt with your reply to the Notice. When the USPTO processes the reply to the Notice, the USPTO will generate another Filing Receipt incorporating the requested corrections (if appropriate).

Applicant(s)

→ HINARD
Stephane Lubiarz, Paris, FRANCE;
Edouard HINARD, Paris, FRANCE;
Francois Capman, Versailles, FRANCE;
Philip Lockwood, Vaureal, FRANCE;

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Domestic Priority data as claimed by applicant

THIS APPLICATION IS A 371 OF PCT/FR00/02220 08/02/2000

Foreign Applications

FRANCE 99/10128 08/04/1999

Projected Publication Date: N/A

Non-Publication Request: No

Early Publication Request: No

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MAY 29 2001

Trop, Pruner, & Hu, P.C.

DOCKET INFORMATION

Title

Method and device for detecting voice activity

Base Rate: _____
Due Date: _____
Action: _____

☐ Docket ☐ Excel ☐ Access
☐ Pat. App ☐ Abst./Title Pg ☐ Draw. [I/F]

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Bib Data Sheet

CONFIRMATION NO. 4915

SERIAL NUMBER 09/806,756	FILING DATE 05/03/2001 RULE	CLASS 381	GROUP ART UNIT 2641	ATTORNEY DOCKET NO. MATR-0018-US
APPLICANTS Stephane Lubiarz, Paris, FRANCE; Edouard Hinard, Paris, FRANCE; Francois Capman, Versailles, FRANCE; Philip Lockwood, Vaureal, FRANCE;				
** CONTINUING DATA ***** THIS APPLICATION IS A 371 OF PCT/FR00/02220 08/02/2000				
** FOREIGN APPLICATIONS ***** FRANCE 99/10128 08/04/1999				
IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 08/30/2001				
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged Examiner's Signature _____ Initials _____	STATE OR COUNTRY FRANCE	SHEETS DRAWING 5	TOTAL CLAIMS 13	INDEPENDENT CLAIMS 2
ADDRESS Dan C Hu Trop Pruner & Hu Suite 100 8554 Katy Freeway Houston ,TX 77024				
TITLE Method and device for detecting voice activity				
FILING FEE RECEIVED 1278	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	



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